

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	OS	68225	10/15/98
O.I.P.E. CLASSIFIER		31	11/9/98
FORMALITY REVIEW		68904	11/27/98

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/14/98
2	✓	✓	6/4/98
3	✓	✓	12/9/98
4	✓	✓	01/01/99
5	✓	✓	02/02/99
6	✓	✓	03/03/99
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	5/14/98
52	✓	✓	6/4/98
53	✓	✓	12/9/98
54	✓	✓	01/01/99
55	✓	✓	02/02/99
56	✓	✓	03/03/99
57	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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